## GREENE COUNTY CERTIFICATION OF VALUE

Completing and returning this form could be a direct benefit to you. Your cooperation with sales information will assist in the calculation of fair and equal values of properties in your neighborhood. All information is used for overall statistical studies of property in Greene County.

Please supply the following information for the Greene County Assessor to check against existing records. If you are not sure, do not worry about leaving a field blank.

Property Address:	Parcel Number: 88  Date Acquired:		
Owner Mailing Address:	School District:		
	<b>*</b>		
	Lot Size: Seller Name:		
	Buyer Name:		
	Duyer Name		
Please provide the following information:			
SPECIAL FACTORS (Check all boxes which pertain.)	8. WAS ANY PERSONAL PROPERTY (SUCH AS FURNITURE,		
☐ Sale between immediate family members:	EQUIPMENT, MACHINERY, LIVESTOCK, CROPS, BUSINESS		
SPECIFY THE RELATIONSHIP	FRANCHISE OR INVENTORY, ETC.) INCLUDED IN THE SALE		
☐ Sale involved corporate affiliates belonging to the same parent	PRICE? ☐ YES ☐ NO		
company	If yes, please describe		
☐ Auction Sale or Sale Involving Multiple Non-Related Parcels			
☐ Deed transfer in lieu of foreclosure or repossession	Estimated value of all personal property items included in the sale		
☐ Sale by judicial order (by guardian, executor, conservator,	price \$		
administrator, or trustee of an estate)	If Mobile Home Year Model/Size		
☐ Sale involved a government agency or public utility	9. WHAT APPRAISED VALUE WAS ARRIVED AT BY THE BANK /		
☐ Buyer (new owner) is a religious, charitable, or benevolent	MORTGAGE CO./ FEE APPRAISER?		
organization, school or educational association	10. METHOD OF FINANCING (check all that apply):		
☐ Buyer (new owner) is a financial institution, insurance company,	☐ New Loan(s) from a Financial Institution		
Pension fund, or mortgage corporation	☐ Seller Financing ☐ Assumption of Existing Loan(s)		
Sale of only a partial interest in the real estate	☐ All Cash ☐ Trade of Property ☐ Not Applicable		
☐ Sale involved a trade or exchange of properties	11. DOES THE BUYER HOLD TITLE TO ANY ADJOINING PROPERTY?		
NONE OF THE ABOVE	YES NO		
2. CHECK USE OF PROPERTY AT THE TIME OF SALE:	12. DO YOU FEEL YOU PAID FAIR MARKET VALUE FOR YOUR		
☐ Single Family Residence ☐ Agricultural Land	PROPERTY? YES NO		
☐ Farm/Ranch With Residence Mineral Rights Included?	13. WAS THE PROPERTY RENTED OR LEASED AT THE TIME OF		
☐ Condominium Unit ☐ Yes ☐ No	SALE? YES NO Monthly Lease Amount \$		
☐ Vacant Land ☐ Commercial/Industrial Bldg.	14. IF AN INCOME PRODUCING PROPERTY WHAT WAS THE		
Other: (Specify) Apartment Building	PREVIOUS YEARS NOI BEFORE DEBT SERVICE? \$		
(#of units)	15. ARE THERE ANY FACTS WHICH WOULD CAUSE THIS SALE TO		
3. WHAT IS THE FUTURE USE IF DIFFERENT FROM CURRENT USE?	BE A NON-ARMS LENGTH / NON-MARKET VALUE TRANSACTION?  ☐ YES ☐ NO		
4. DID THE SALE PRICE INCLUDE AN EXISTING BUSINESS?	LITES LINO		
YES NO			
5. ARE YOU AWARE OF ANY CHANGES IN THE PROPERTY SINCE	16. TOTAL SALE PRICE \$		
JAN 1 <sup>ST</sup> ? YES NO	10. TOTAL SALL FRICE \$		
☐ Demolition ☐ New Construction ☐ Remodeling ☐ Additions	DEED OR SALE DATE/		
Date Completed	17. I CERTIFY THAT THE INFORMATION PROVIDED FOR THE		
6. WAS THE PROPERTY MADE AVAILABLE TO OTHER POTENTIAL	PROPERTY, TO THE BEST OF MY KNOWLEDGE AND BELIEF IS		
PURCHASERS? ☐ YES ☐ NO If not, explain	CORRECT.		
	PRINT NAME		
7. WERE ANY DELINQUENT TAXES ASSUMED BY THE	PHONE #		
PURCHASER? ☐ YES ☐ NO Amount \$	SIGNATURE		

If you need assistance in completing the form please call the Appraisal Department at 868-4101. After completing this form please return it to the Greene County Assessor, 940 Boonville, Springfield, MO 65802. You may also fax this form to 868-4844.

Please complete and return with the sales questionnaire to help verify, update or correct the information our office currently has on your home.

PLEASE CHECK ALL THAT APPLY				
( ) Attic (do no ( ) Crawl	built in: ot check if there is not a permanent stairca	,	( ) Finished Attic	
space	( ) Basement: ( ) 1/4 ( ) 1/2 ( ) 3/4	1 () Full		
Basement Use		( ) []  . fining a		
Decement Fini	( ) Finished: ( ) 1/4 ( ) 1/2 ( ) 3/4		a Dagge V / N	
Basement Finish Type: Finished Divided Living Area Y / N Finished Open Rec. Room Y / N  Heating: () Central () Baseboard () Hot water/Steam () No heat () Other type				
Cooling:		eam () No neat ()	Other type	
•	ing Masonry Fireplaces:	# of Chimneys	# of openings	
( ) Gas Mason		# of Chimneys	# of openings	
• •	o Clearance Gas Fireplace:	# of Chimneys	# of openings # of openings	
( ) i leiab/Zeio	Oceanance Gas i nepiace.	# Of Chillings	# or openings	
# of hedrooms	including bedrooms used for other purpo	1888 .		
# of full baths: (full bath is a sink, shower or tub and toilet)				
# of half baths: (half bath is a sink and toilet)				
	nbing fixtures: (laundry tub, bar	sink. Jacuzzi tub. etc.)		
	(),	,		
Other rooms in my home include: ( ) Kitchen ( ) Library ( ) Laundry				
	( ) Breakfast room ( ) Sunroom	( ) Other rooms		
	( ) Formal dining ( ) Bonus room (I.e.	-		
	( ) Formal living ( ) Media room	<u> </u>		
	( ) Den/study ( ) Family room	_		
Flooring:	() Carpet () Ceramic tile ()	Vinyl () Hardwood	( ) Other type	
Countertops: ( ) Tile ( ) Granite ( ) Formica/laminate ( ) Solid Surface ( ) Other				
Cabinets: ( ) Oak ( ) Birch ( ) Maple ( ) Cherry ( ) Metal ( ) Other type				
My home was	gutted and completely remodeled in 19	<del></del>	20	
My home was	not gutted but was updated in 19 This update included:		20	
Water: Sewer:	( ) City ( ) Private well ( ) Shared well ( ) City ( ) Septic ( ) Lagoon	( ) Community well	# of parties	
( ) Rental Property Rent per month \$ Items included in rent ( utilities, furniture, etc)				